Sample Form – Transcript Redaction Request E-file the Transcript Redaction Request on CM/ECF and provide a paper copy to the court reporter

UNITED STATES DISTRICT COURT EASTERN DISTRICT OF WASHINGTON

		\	
	,)	Case No.: <u>CV-08-999-RHW</u>
	Plaintiff(s),)	
)	Transcript Redaction Request
V.)	
)	
)	
	Defendant(s).)	

Pursuant to Fed.R.Civ.P. 5.2/Fed.R.Crim.P. 49.1, Plaintiff/Defendant requests that the following personal identifiers be redacted from the transcript filed on April 12, 2008:

Redact the Social Security number on page $\underline{12}$, line $\underline{8}$ to read

<u>xxx-xx-1111;</u>;

Redact the Taxpayer identification number on page $\underline{32}$, line $\underline{5}$, to read

xxxxxxx2233;

Redact the date of the individual's birth on page $\underline{22}$, line $\underline{14}$, to read

xx/xx/1952;

Redact the minor's name on page $\underline{13}$, line $\underline{5}$, to read

Lxxx Dxxxx;

Redact the financial account number on page $\underline{56}$, line $\underline{3}$, to read

XXXXX-XXXX	<u>XX6622;</u>	
Redact the home	e address on pag	ge <u>44</u> , line <u>2</u> , to read
(city)	and (state)_	
Dated this	day of	, 2008.
		s/Attorney's Name
		Attorney's Name
	CERTIFICA	ATE OF SERVICE
I hereby certify t	that on (Date)	, I electronically filed the foregoing
with the Clerk of the C	Court using the C	CM/ECF System which will send notification
of such filing to all reg	gistered user of s	said CM/ECF System, as indicated on the
accompanying Notice	of Electronic Fi	ling, and I hereby certify that I have mailed
by United States Postal	l Service the do	cument to the following Court Reporter and
non-CM/ECF participa	ants:	
Court Reporter:		
Non-CM/ECF Participa		
1		
Atto Atto Lav Lav	Attorney's Name a corney's Name a corney for (Plain w Firm Name w Firm Address w Firm Phone N	nd Bar Number tiff/Defendant)

Law Firm Fax Number Attorney's Email Address